



**AMAN ENVIRONMENTAL CONSTRUCTION, INC.**  
**REMEDIATION AND DEMOLITION CONTRACTORS**

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December 22, 1997

**MR. GARY POWELY**  
4060 Lakewood Blvd., Bldg. 801  
Long Beach, CA. 91706  
(562) 627-3014

**RE: GENERATOR'S YELLOW COPY OF THE UNIFORM HAZARDOUS  
WASTE MANIFEST FOR THE SHIPMENT OF LIQUID WASTE  
MATERIALS.**

**AECI PROJECT NO. 97-1027  
MANIFEST NO. 96764181  
MCDONNELL DOUGLAS  
TORRANCE FACILITY  
UST REMOVAL ACTIVITIES**

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Dear Mr. Powely,

Please find enclosed the generator's yellow copy of the Uniform Hazardous Waste Manifests utilized for the liquid waste materials associated with the underground storage tank removed from the above referenced facility.

Please retain this copy for your records. If you have any questions regarding the documentation or require additional information, please feel free to contact me anytime at (818) 967-4287.

Sincerely,

**AMAN ENVIRONMENTAL CONSTRUCTION, INC.**

Joe Flores  
Project Manager

Enclosure

FL\1027\Yelo-Man.Ltr

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address MCDONNELL DOUGLAS REALITY COMPANY/ 4050 LAKEVIEW BLVD., SUITE 801 LONG BEACH, CA 90808		CAD084510005641181		A. State Manifest Document Number 96764181	
4. Generator's Phone ( ) 562-627-3014		6. US EPA ID Number		B. State Generator's ID	
5. Transporter 1 Company Name NIETO AND SONS TRUCKING, INC.		CAT080016116		C. State Transporter's ID	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 714-990-6855	
9. Designated Facility Name and Site Address DEHENNO KENDON 2000 N. ALAMEDA STREET CONPTON, CA 90222		10. US EPA ID Number CAT080013352		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID	
				H. Facility's Phone 310-537-7100	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. NON RCRA HAZARDOUS WASTE LIQUID		001 T T	XX120 G		State 221 EPA/Other EXEMPT
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
		a. b.			
		c. d.			
15. Special Handling Instructions and Additional Information NO SMOKING alternate * CROSBY & OVERTON WEAR APPROPRIATE PROTECTIVE CLOTHING disposal * 1630 W. 17th STREET - 310-432-5445 EMERGENCY TELEPHONE # (714) 990-6855 sites * LONG BEACH, CA 90813 CAD028409019					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name JOE FLORES MCDONNELL DOUGLAS		Signature [Signature]		Month Day Year 08/21/97	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name SALVADOR AREOLA		Signature [Signature]		Month Day Year 08/21/97	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Month Day Year					

DO NOT WRITE BELOW THIS LINE.